PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number
MICHICO
$\Theta 145415$

(Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FC	OR ··		NUMBER FILED			NUMBER EXTRA					1			
BASIC FEE			Maria de la composición dela composición de la composición de la composición de la composición de la composición dela composición de la composición dela composición dela composición dela composición de la composición dela composición de						RATE	FEE	-	RATE	FEE	
					<u>.</u>	. 100=				345.00	OR		690.00	
	TAL CLAIMS		<u> </u>	5 minus 2	20= *	4 <u>5</u>			X\$ 9=	<u></u>	OR	X\$18=	810	
INDEPENDENT CLAIMS \Quad \text{minus 3 = } \text{* } \text{3}							X39=		OR	X78=	231			
MULTIPLE DEPENDENT CLAIM PRESENT									400		1		101	
* If the difference in column 1 is less than zero, enter "0" in column 2								L	+130=		OR	+260=	برج	
									TOTAL		OR	TOTAL	1/34	
CLAIMS AS AMENDED - PART II									~*** A	~ 1 717 √	22	OTHER		
	SE VICE S		imn 1) AIMS	Taring Arthur	(Colur		(Column 3)	3) SMALL				SMALL ENTITY		
AMENDMENT A	•	REM/ AF	AINING TER DMENT		NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	**		= - - - - - - - - - -	;	X\$ 9=		OR	X\$18=		
AME		*		Minus	***		=		X39=		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										1 1	+260=		
											OR	TOTAL		
		AD	TOTAL DIT. FEE		OR	ADDIT. FEE								
			imn 1) AIMS		(Colur		(Column 3)	_			. ,			
AMENDMENT B		REM/	AINING TER DMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ND	Total	*		Minus	**		=	;	X\$ 9=		OR	X\$18=		
\ME		•		Minus	***		=		X39=			X78=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-130=		OR			
											OR	+260=		
											OR	TOTAL ADDIT. FEE		
			mn 1)		(Colun		(Column 3)		DIT. FEE				•	
AMENDMENT C		REMA AF	NIMS NINING TER DMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2	Total	*		Minus	**		=	×	(\$ 9= ·		ÓR	X\$18=		
AME		*		Minus	***		=	\	K39=		·	X78=		
	FIRST PRESEN	NTATIO	N OF MU	JLTIPLE DEP	ENDENT	CLAIM		j		Ì	OR	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
• 11	the entry in colum	1 ic lo	oo than th	ontre in coleu	0 write	"O" :n ool		<u></u>	130=		OR	+260=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OR TOTAL ADDIT. FEE														
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												umn 1		